

Development Services / Planning Department 424 3rd Avenue West Prince Rupert, BC V8J 1L7 Phone: (250) 627 0946 Fax: (250) 627 0979 Email: planning@princerupert.ca

APPLICATION FOR AN OCP AND/OR ZONING BYLAW AMENDMENT

Phone:

APPLICATION INFORMATION (FOR OFFICE USE ONLY)

Application Number: ZBLA-

Related Applications:

APPLICANT

Name:

Address:

Email:

APPROVED AGENT (OPTIONAL)	
Name:	
Address:	
Email:	Phone:

PROPERTY OWNER(S)	
Name:	
Address:	
Email:	Phone:
Name:	
Address:	
Email:	Phone:

UBJECT PROPERTY	
ddress(es):	
ID(s):	

PROPOSAL **PRIOR TO FILLING OUT THIS PAGE**, the applicant and/or agent should contact the Planning Department to setup an in-person or online meeting to discuss their proposal so that they will know: (a) the additional attachments(s) required by the Planning Department for the specific proposal Proposal Description Please list applicable OCP and/or Zoning Bylaw amendments below: Current OCP Designation/Policy Proposed OCP Designation/Policy OCP and/or Zoning Bylaw Amendments Current Zoning Bylaw Zoning/Policy Proposed Zoning Bylaw Zoning/Policy AFTER FILLING OUT PAGE 1 AND 2, the applicant and/or agent should submit the following to the Planning Dept.: (a) the application form (WITHOUT FILLING OUT PAGE 3)

(b) the additional attachments (s) required by the Planning Department for the specific proposal

If the documents above are satisfactory, a Planner will sign below indicating that the application package is:

- (a) ready to receive authorization from the property owner(s)
- (b) and subsequently, ready to be taken in by the City (this does not mean an amendment has been approved)

PLANNING DEPARTMENT APPROVAL FOR APPLICATION INTAKE (FOR OFFICE USE ONLY)

Signature of Planner:

AUTHORIZATION						
This page should only be filled out <u>AFTER</u> RECEIVING PLANNING DEPARTMENT APPROVAL FOR APPLICATION INTAKE (SEE PAGE 2).						
Rupert's bylaws and declare that stat application, including personal inform	ake or contribute to this application in acc ements in this application are accurate a ation and attachments, is open for inspe olic. Furthermore, it is understood that all	nd precise. It is understood that this ction by the public and may be				
Name:	Signature:	Date:				
Name:	Signature:	Date:				
As a registered property owner for the subject property, I confirm that this application is made with my full knowledge and consent.						
Name:	Signature:	Date:				
	Signature: Signature:	Date:				
Name:						
Name:						
Name: Name: FEES (FOR OFFICE USE ONLY) This page should only be filled out	Signature:	Date:				
Name: Name: FEES (FOR OFFICE USE ONLY) This page should only be filled out	Signature:	Date:				
Name: Name: FEES (FOR OFFICE USE ONLY) This page should only be filled out AFTER RECEIVING PLANNING DE	Signature:	Date:				

OCP Amendment Application	\$1100.00	x	=	
Zoning Bylaw Amendment Application	\$1100.00	x	=	
OCP and Zoning Bylaw Amendment Apl.	\$1140.00	х	=	
Copy of Title Certificate (Within 30 days of application intake date)	\$15.00	x	=	
			TOTAL =	